

# Montreal Manifesto



## Preamble

HIV disease remains a worldwide epidemic, affecting all countries. We have made much progress on medical responses to HIV, but these are not accessible to all. Progress on non-medical aspects of HIV is blocked by coercive and moralistic policies and actions that have no place in considerations of health. We cannot make progress on HIV when we invest in military and ecological destruction that only serve to imperil the health of the population, including people living with HIV and those most exposed to it.

People, governments, international bodies, corporations, and health care professionals must take action to ensure equitable distribution of the progress we have made and to remove the barriers to that equity in the form of laws, policies and attitudes. In particular, all must act within the scope of their powers to put into place measures to equitably address HIV and to ensure that none of their other policies or practices serve to frustrate them.

## Human Rights

1. Every person has the right to a standard of living adequate for their health and well-being as well as that of their families, including food, clothing, housing and medical care and necessary social services, without regard to race, colour, sex, gender, gender identity, sexual orientation, language, religion, political or other opinion, national or social origin, property, age, birth, HIV status or any other characteristic.
2. Equality of all people must be guaranteed by effective legislation and accessible enforcement mechanisms.
3. Sexual and reproductive health are important components of health and well-being and must be within the control of the individual concerned.
4. The use of the criminal law serves only to exacerbate the vulnerability of people living with HIV, sex workers, people who use drugs, and sexual minorities. Such criminalization must end.
5. There must be no restrictions on international mobility based solely on HIV status.

## Prevention

6. Governments and education structures must ensure sufficient sexual health education for all, including information campaigns for the general public.

7. All people are entitled to free and unfettered access to information and the tools for prevention, including pharmaceutical and barrier methods for prevention, harm reduction information and supplies, safe drug supply.
8. The maintenance of an undetectable HIV viral load must be recognized as effective prevention as well as being of benefit to the person living with HIV. For those who are unable to reach or maintain an undetectable HIV viral load, there exist other effective strategies and tools to prevent HIV transmission.

#### Testing

9. Testing for HIV must be based on free and informed consent, without the risk of losing other rights.
10. All people must have free access to a broad range of testing options, including self-testing and community-based options, and access to post-test prevention or treatment services.
11. HIV testing and results must remain confidential and not be used for non-consensual public health surveillance of individuals.

#### Treatment

12. The full range of optimal treatment options must be made available without cost to all, without limitation (geographic location, migratory status, category of transmission or disease progress, for example).
13. Continuity of care must not be allowed to be interrupted in any way by incarceration or forced or chosen migration.
14. People living with HIV are entitled to support in their treatment from appropriately trained medical professionals, community-based resources and peers.
15. It must be recognized that the right to health for people living with HIV is broader than HIV status alone, and access to all forms of health care must be guaranteed to ensure their global health.

#### Global Equity

16. The Global Fund to fight AIDS, Malaria and Tuberculosis must be adequately funded, including targets that reflect actual needs to respond to HIV and the health needs of those living with or most exposed to HIV.
17. National, regional, and local governments must adequately fund the response to HIV in their jurisdictions and prioritize the reinforcement of their health systems to prepare for new and parallel public health challenges.
18. There must be broad sharing of scientific and research data to ensure universal access to advances in the response to HIV. Data sharing must include all available trial results, whether or not they are favorable for a particular product.

19. An international system of medication approval must be put into place to ensure timely access to new treatments for all.
20. Supplies and equipment related to HIV prevention, care, treatment, support and monitoring must be universally available.

#### Research

21. Research is important to our progress against HIV and must be publicly supported, with benefits accruing to the public and not only private interests.
22. Research activities must adhere to the GIPA/MEPA principle, including all affected populations in all aspects of research that concerns them, including planning, defining research questions, evaluating ethical considerations, carrying out, analyzing and sharing results, and planning subsequent actions. This includes a special responsibility to respect the roles of Indigenous peoples and their control of the data that concerns them.
23. Underrepresented populations must be adequately included in research to ensure statistical validity of the results to all people. equity of access to the benefits of the results.
24. Research must adhere to the principle that new treatments are always measured against the current standard of care, at a minimum.
25. Pharmaceutical research must be required to include Phase IV (post-marketing) surveillance of all products.
26. Research priorities must include therapeutic and preventive vaccines, the impact of an undetectable viral load on transmission beyond sexual activity, and a cure for HIV.

#### Conclusion

We call on all people living with or vulnerable to HIV and their allies, scientists, health care professionals and governments to commit to these actions and principles.

We have the means and the knowledge to end HIV transmission now and the scientific capability to develop preventive and therapeutic vaccines and a cure for HIV if we commit to adequately funding the response to HIV and actively removing the legal and structural barriers that serve to imperil the health of vulnerable populations the world over.

We deserve a peaceful world with a healthy environment and without poverty or HIV.



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